FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. G PAC P. O. Box 4326 ADDRESS (number and street) (Check if address is changed) Louisville 40202 KY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS g@gregfischer.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 01 2018 C00558734 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Stratton, R. Wayne, , , Type or Print Name of Treasurer Stratton, R. Wayne, , , [Electronically Filed] 03 06 2017 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

FI	FC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	OF C	OMMITTEE	1 aye 2
Cano	didate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.))
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate
Name Candid			
Candid Party	date Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	y Con	nmittee:	(D
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Politi	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint	Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address 642 South 4th St, Ste 300 Louisville CITY STATE ZIP CODE Title or Position	FEC Form 1 (Revi	sed 02/2009)	Page 3
NONE Mailing Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundralsing Representative, or Leadership PAC Spons NONE CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundralsing Representative Leadership PAC Spons Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Stratton, R. Wayne, Full Name 642 South 4th St, Ste 300 Mailing Address Title or Position CITY STATE ZIP CODE Treasurer List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name of Treasurer Stratton, R. Wayne, G42 South 4th St, Ste 300 Mailing Address G42 South 4th St, Ste 300 CITY STATE ZIP CODE Title or Position	Write or Type Committee I	Name	
Mailing Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sg Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of com books and records. Stratton, R. Wayne, , , Full Name 642 South 4th St, Ste 300 Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name of Treasurer Stratton, R. Wayne, , , Full Name of Treasurer G842 South 4th St, Ste 300 Mailing Address [642 South 4th St, Ste 300 Louisville KY 40202	G PAC		
Mailing Address City State Zip Code	Name of Any Connect	ted Organization, Affiliated Committee, Joint Fundraising Representative, or Le	adership PAC Sponsor
Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Stratton, R. Wayne, Full Name Mailing Address Louisville Louisville CITY STATE ZIP CODE Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name Stratton, R. Wayne, Full Name G42 South 4th St, Ste 300 Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address on treasurer). Full Name G17 STATE STATE STATE STATE STATE ZIP CODE Title or Position	NONE		
Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Stratton, R. Wayne, Full Name Mailing Address Louisville			
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Space Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Stratton, R. Wayne, , , Full Name Mailing Address Louisville	Mailing Address		
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Space Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Stratton, R. Wayne, , , Full Name Mailing Address Cuty State Stat			
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Space Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Stratton, R. Wayne, , , Full Name Mailing Address G42 South 4th St, Ste 300			
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Full Name Mailing Address 642 South 4th St, Ste 300 Louisville Louisville Louisville Treasurer Telephone number		: Identify by name, address (phone number optional) and position of the person	in possession of committ
Mailing Address Couisville	Stratt	on, R. Wayne, , ,	
Title or Position CITY STATE ZIP CODE Treasurer Telephone number Telephone num	Full Name	.642 South 4th St. Ste 300	
Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address 642 South 4th St, Ste 300	Mailing Address		
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any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address 642 South 4th St, Ste 300	Treasurer	Telephone number	_ 583 0248
Mailing Address 642 South 4th St, Ste 300			the name and address of
Louisville CITY STATE ZIP CODE Title or Position		on, R. Wayne, , ,	
CITY STATE ZIP CODE Title or Position	Mailing Address	642 South 4th St, Ste 300	
CITY STATE ZIP CODE Title or Position			
Title or Position			
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Full Name of Designated	Pasley, Paula, , ,	
Agent	642 South 4th St. Str. 200	
Mailing Address	642 South 4th St, Ste 300	
	Louisville KY 40202	
	CITY STATE Z	IP CODE
Title or Position Assistant to Tre	easur Telephone number 502 - 58	83 - 0248
		accounts, rents
safety deposit b Name of Bank,	oxes or maintains funds. Depository, etc. Old National Bank ,333 East Main Street #100	accounts, rents
safety deposit be	oxes or maintains funds. Depository, etc. Old National Bank ,333 East Main Street #100	accounts, rents
safety deposit be Name of Bank,	oxes or maintains funds. Depository, etc. Old National Bank ,333 East Main Street #100	accounts, rents
safety deposit be Name of Bank,	Depository, etc. Old National Bank 333 East Main Street #100 Louisville KY 40202	accounts, rents
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